

MEMORIAL NURSING & REHABILITATION CENTER
135 SOUTH GIBSON STREET

MEDFORD 54451 Phone: (715) 748-8100

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/03): 96

Total Licensed Bed Capacity (12/31/03): 101

Number of Residents on 12/31/03: 94

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

Yes

Yes

Yes

94

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		9.6
Supp. Home Care-Personal Care	No					1 - 4 Years		53.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.4	More Than 4 Years		23.4
Day Services	No	Mental Illness (Org./Psy)	33.0	65 - 74	6.4			----
Respite Care	Yes	Mental Illness (Other)	4.3	75 - 84	24.5			86.2
Adult Day Care	No	Alcohol & Other Drug Abuse	1.1	85 - 94	56.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	5.3		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.1		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	16.0	65 & Over	93.6	-----		
Transportation	No	Cerebrovascular	10.6	-----	----	RNs		15.5
Referral Service	No	Diabetes	20.2	Gender	%	LPNs		2.5
Other Services	No	Respiratory	7.4	-----	----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	1.1	Male	31.9	Aides, & Orderlies		
Mentally Ill	No		----	Female	68.1			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	2	100.0	140	71	100.0	140	0	0.0	0	15	100.0	152	0	0.0	0	6	100.0	140	94
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	2	100.0		71	100.0		0	0.0		15	100.0		0	0.0		6	100.0		94

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	6.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.3	Bathing	1.1	75.5	23.4	94
Other Nursing Homes	3.9	Dressing	10.6	74.5	14.9	94
Acute Care Hospitals	71.4	Transferring	30.9	64.9	4.3	94
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	17.0	68.1	14.9	94
Rehabilitation Hospitals	0.0	Eating	57.4	41.5	1.1	94
Other Locations	16.9	*****				
Total Number of Admissions	77	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.5	Receiving Respiratory Care	0.0	
Private Home/No Home Health	11.7	Occ/Freq. Incontinent of Bladder	40.4	Receiving Tracheostomy Care	2.1	
Private Home/With Home Health	10.4	Occ/Freq. Incontinent of Bowel	34.0	Receiving Suctioning	1.1	
Other Nursing Homes	19.5			Receiving Ostomy Care	3.2	
Acute Care Hospitals	6.5	Mobility		Receiving Tube Feeding	3.2	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	2.1	Receiving Mechanically Altered Diets	30.9	
Rehabilitation Hospitals	0.0					
Other Locations	2.6	Skin Care		Other Resident Characteristics		
Deaths	49.4	With Pressure Sores	7.4	Have Advance Directives	87.2	
Total Number of Discharges		With Rashes	21.3	Medications		
(Including Deaths)	77			Receiving Psychoactive Drugs	62.8	

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	Other Hospital-Based Facilities	All Facilities		
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.8	90.1	1.03	87.4	1.06
Current Residents from In-County	84.0	83.8	1.00	76.7	1.10
Admissions from In-County, Still Residing	20.8	14.2	1.47	19.6	1.06
Admissions/Average Daily Census	81.9	229.5	0.36	141.3	0.58
Discharges/Average Daily Census	81.9	229.2	0.36	142.5	0.58
Discharges To Private Residence/Average Daily Census	18.1	124.8	0.14	61.6	0.29
Residents Receiving Skilled Care	100.0	92.5	1.08	88.1	1.14
Residents Aged 65 and Older	93.6	91.8	1.02	87.8	1.07
Title 19 (Medicaid) Funded Residents	75.5	64.4	1.17	65.9	1.15
Private Pay Funded Residents	16.0	22.4	0.71	21.0	0.76
Developmentally Disabled Residents	0.0	1.2	0.00	6.5	0.00
Mentally Ill Residents	37.2	32.9	1.13	33.6	1.11
General Medical Service Residents	1.1	22.9	0.05	20.6	0.05
Impaired ADL (Mean)*	44.5	48.6	0.91	49.4	0.90
Psychological Problems	62.8	55.4	1.13	57.4	1.09
Nursing Care Required (Mean)*	8.6	7.0	1.24	7.3	1.18